

STANDARD FORM 52

PROMULGATED BY THE  
U. S. CIVIL SERVICE COMMISSION  
JANUARY 1967 FEDERAL PERSONNEL  
MANUAL CHAPTER RI

## REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.  
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr.—Miss—Mrs.—One given name, initial(s), and surname) <b>Mrs. Anna Tarasoff</b>	2. DATE OF BIRTH <b>5 May 1923</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>26 June 57</b>
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Reassignment</b>		6. EFFECTIVE DATE A. PROPOSED;  B. APPROVED:	7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)			

FROM— Clerk OS-0301.26-4 BU #5423 \$3415.00 p.a.  DDS/Office of Personnel Personnel Assignment Division Placement Branch (Clerical) Interim Assignment Section Washington, D. C.	8. POSITION TITLE AND NUMBER  9. SERVICE, GRADE, AND SALARY  10. ORGANIZATIONAL DESIGNATIONS  11. HEADQUARTERS	TO— Clerk OS-0301.26-4 BVP-8073.12/907-4 \$3415.00 p.a.  DDP/FI Staff Division D Project Annex Project [P B] Jointly Branch 2 Section B Washington, D. C.	12. FIELD OR DEPARTMENTAL <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL
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## A. REMARKS (Use reverse if necessary)

Present incumbent is pending reassignment.

## B. REQUESTED BY (Name and title)

## D. REQUEST APPROVED BY

## C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)

03 July 58 x 4281

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

## 13. VETERAN PREFERENCE

NONE	WWII	OTHER	5-PT.	10-POINT
<input checked="" type="checkbox"/>				DISAB. OTHER

## 14. POSITION CLASSIFICATION ACTION

NEW	VICE	I. A.	REAL

SD:DS

15. SEX F	16. APPROPRIATION FROM: 7-6509-20 TO: 7-2306-23
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17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes
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18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY) 8 April 1957
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19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: D. C.
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## 20. STANDARD FORM 50 REMARKS

21. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS:
A.			RETURN TO CIA Background Use Only Do Not Reproduce
B. CEIL. OR POS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.			
E.			
F. APPROVED BY			